PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0651-0031

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Ī	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 1173-1053PUS1							
	FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)	1173-	1053P051						
Ì	Application Number 09/459,062-Conf. #9639	Filed December 10, 1999							
	For CONSTRUCTION AND USE OF RECOMBINANT PARAINFLUE CHIMERIC GLYCO PROTEIN	ONSTRUCTION AND USE OF RECOMBINANT PARAINFLUENZA VIRUSES EXPRESSING A HIMERIC GLYCO PROTEIN							
	Art Unit 1648	Examiner	S. B. Chen						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the a identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate formula is a second content of the content o									
ı	Fee	Small Entity Fee	,						
	One month (37 CFR 1.17(a)(1)) \$120	\$60	\$						
	Two months (37 CFR 1.17(a)(2)) \$450	\$225	\$						
	Three months (37 CFR 1.17(a)(3)) \$1020	\$510	\$						
	Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$						
l	X Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$ 2,160.00						
	Applicant claims small entity status. See 37 CFR 1.27.  X A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.  I am the applicant/inventor.								
	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number								
	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34	36,623	·						
l	my Nell	Augus	t 26, 2005						
l		Date							
l	Mark J. Nuell, Ph.D.  Typed or printed name	(703) 205-8043 Telephone Number							
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total of 1 forms are submitted.								
L	L Total of Totals are submitted.								

08/29/2005 SZEWDIE1 00000031 09459062

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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

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Effective on 12/08/	Complete if Known															
Fees pursuant to the Consolidated Appropri	Application Number 09/459,062-Conf. #9639															
FEE TRANSMITTAL For FY 2005		Filing Date Dec		ecember 10, 1999												
		First Named Inventor Tao		ao TAO												
		Examiner Name S. B.		B. B. Chen												
Applicant claims small entity statu	Art Unit 1648															
TOTAL AMOUNT OF PAYMENT	TOTAL AMOUNT OF PAYMENT (\$) 3,750.00			Attorney Docket No. 1173-1053PUS1												
METHOD OF PAYMENT (check all that apply)																
X Check Credit Card Money Order None Other (please identify):																
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP																
For the above-identified depo	sit account, the Director is	s hereby authorize	d to: (checl	k all that apply)												
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing form of the filing form of the filing form of the fee(s) under 37 CFR 1.16 and 1.17  Charge fee(s) indicated below, except for the filing form of the filing																
							FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EX																
Fil		ARCH FEES	EXAMIN	ATION FEES												
Application Type Fee (\$	Small Entity Fee (\$) Fee (\$	Small Entity (5) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)										
Utility 300	150 500	_	200	100		_										
Design 200	100 100	50	130	65												
Plant 200	100 300	150	160	80												
Reissue 300	150 500	250	600	300												
Provisional 200	100 0	0	0	0												
2. EXCESS CLAIM FEES						Small Entity										
Fee Description					<u>Fee (\$)</u>	<u>Fee (\$)</u>										
Each claim over 20 (including Reissi	-				50	25										
Each independent claim over 3 (inclu	iding Reissues)				200	100										
Multiple dependent claims					360	180										
Total Claims Extra Claims		Paid (\$) Multiple Depend														
7458 =16>	50.00 = 80	00.00	.00 <u>Fee (\$)</u> <u>Fee Paid (\$)</u>													
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)																
6 -6 = 0 x =   3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer																
								listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 shorts or fraction thereof. See 35 IJS C 41(a)(1)(G) and 37 CFR 1.16(s)								
								sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 (round up to a whole number) x =																
4. OTHER FEE(S)  Non-English Specification. \$130 fee (no small entity discount)																
								Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 7						90.00 160.00		
SUBMITTED BY Signature	00	Registration No. (Attorney/Agent)	36,623	Telephone	(703) 20	5-8043										
Name (Print/Type) Mark Nuell Ph	(Automey/Agent)		Date August 26, 2005													